

WHAT IS COVID-19?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. Patients with COVID-19 have experienced mild to severe respiratory illness, including fever, cough and shortness of breath. The virus that causes COVID-19 is a novel (new) coronavirus. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold.

HOW DOES COVID-19 SPREAD?

The virus that causes COVID-19 is thought to spread mainly from person-to-person, between people who are in close contact with one another (within about 6 feet) through respiratory droplets when an infected person coughs or sneezes. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

HOW SHOULD WE PREPARE FOR A COVID-19 OUTBREAK?

Preparing now for a COVID-19 outbreak is the best way to protect people experiencing homelessness, homeless service provider staff and volunteers from this disease. An outbreak of COVID-19 in your community could cause illness among people experiencing homelessness, contribute to an increase in emergency shelter usage and/or lead to illness and absenteeism among homeless service provider staff.

- Establish ongoing communication with your local public health department to facilitate access to relevant information before and during an outbreak.
- Connect to community-wide planning.
- Develop or update your emergency operations plan. Discuss the plans and determine how they may impact
 aspects of your events, such as personnel, security, services and activities, functions and resources. Develop a
 contingency plan that addresses various scenarios you may encounter during a COVID-19 outbreak.
 - o **Identify a list of key contacts** at your local and state health departments.
 - o **Identify a list of healthcare facilities** and alternative care sites where clients with respiratory illness can seek housing and receive appropriate care.
 - Include contingency plans for increased absenteeism caused by employee illness or illness in employees' family members that requires employees to stay home.
- Address key prevention strategies in your emergency operations plans
 - Promote the daily practice of everyday preventive actions
 - **Encourage respiratory etiquette** (e.g., covering coughs and sneezes with a tissue or sleeve).
 - **Encourage frequent, proper handwashing** with soap and water for at least 20 seconds or with hand sanitizer that contains at least 60% alcohol.
 - Perform routine environmental cleaning. Routinely clean and disinfect all frequently-touched surfaces (e.g., doorknobs, countertops, work stations) with usual cleaning and disinfection products. Follow all instructions on the product label.

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- Provide COVID-19 prevention supplies at your organization. Have supplies on hand for staff, volunteers
 and those you serve, such as soap, hand sanitizer that contains at least 60% alcohol, tissues, trash
 baskets and disposable facemasks. Plan to have extra supplies on hand during a COVID-19 outbreak.
- Plan for staff and volunteer absences. Develop flexible attendance and sick-leave policies. Staff (and
 volunteers) may need to stay home when they are sick, caring for a sick household member or caring for
 their children in the event of school dismissals. Identify critical job functions and positions, and plan for
 alternative coverage by cross-training staff members.
- Identify space that can be used to separate sick people (if possible). Designate a room and bathroom, if available, for client with mild illness who remain at the shelter and develop a plan for cleaning the room daily.
- Be prepared to report cases of respiratory illness that might be COVID-19 to your local health department and to transport persons with severe illness to medical facilities. Discuss reporting procedures ahead of time with a contact person at your local health department.
- Prepare healthcare clinic staff to care for patients with COVID-19 if your facility provides healthcare services and ensure facility has supply of PPE.
- Plan for higher shelter usage during the outbreak.
- Communicate about COVID-19
 - Update and distribute timely and accurate emergency communication information. Identify everyone
 in your chain of command and establish systems for sharing information with them. Maintain up-to-date
 contact information for everyone in the chain of command.
 - Identify and address potential language, cultural and disability barriers associated with communicating COVID-19 information to event staff and participants. Information should be easily understood by everyone attending the events.
 - Help counter stigma and discrimination in your community.
 - People experiencing homelessness may be at increased risk of adverse mental health outcomes. Learn more about <u>mental health and coping</u> during COVID-19.

WHAT SHOULD WE DO IF COVID-19 SPREADS TO OUR COMMUNITY?

- Put your emergency operations and communication plans into action.
 - Stay informed with <u>CDC's up-to-date information</u>.
 - Communicate with your local health department if you are concerned that clients in your facility might have COVID-19.
 - Emphasize everyday preventive actions through intensified communications with employees and visitors to your organization.
 - Stay home when sick.
 - Cover coughs and sneezes with a tissue or use the inside of your elbow.
 - Wash hands often.
 - Limit close contact with others as much as possible (about 6 feet).

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- Provide COVID-19 prevention supplies to event staff and participants. This can include hand sanitizer that contains at least 60% alcohol, tissues, trash baskets, disposable facemasks and cleaners and disinfectants.
- Minimize the number of staff members who have face-to-face interactions with clients with respiratory symptoms. Use physical barriers to protect staff who will have interactions with clients with unknown infection status (e.g. check-in staff)
- Consider alternatives for staff and volunteers who are at high risk for complications from COVID-19.
- o Implement flexible staff attendance and sick-leave policies, if possible.
- Limit visitors to the facility.
- Ensure that clients receive assistance in preventing disease spread and accessing care, as needed
 - In general sleeping areas (for those who are not experiencing respiratory symptoms), ensure that beds/mats are at least 3 feet apart, and request that all clients sleep head-to-toe.
 - Provide access to fluids, tissues, plastic bags for the proper disposal of used tissues.
 - Ensure bathrooms and other sinks are consistently stocked with soap and drying materials for handwashing. Provide alcohol-based hand sanitizers that contain at least 60% alcohol (if that is an option at your shelter) at key points within the facility, including registration desks, entrances/exits, and eating areas.
 - At check-in, provide any client with respiratory symptoms (cough, fever) with a surgical mask.
 - If there is person-to-person spread in your local community, clients may have COVID-19.
 - Monitor clients who could be at high risk for complications from COVID-19 (those who are older or have underlying health conditions) and reach out to them regularly.
 - Confine clients with mild respiratory symptoms consistent with COVID-19 infection to individual rooms, if possible, and have them avoid common areas.
 - Follow CDC recommendations for how to prevent further spread in your facility.
 - If individual rooms for sick clients are not available, consider using a large, well-ventilated room.
 - In areas where clients with respiratory illness are staying, keep beds at least 3 feet apart and use temporary barriers between beds, such as curtains, and request that all clients sleep head-totoe.
 - If possible, designate a separate bathroom for sick clients with COVID-19 symptoms.
 - Consider reducing cleaning frequency in bedrooms and bathrooms dedicated to ill persons to asneeded cleaning (e.g., of soiled items and surfaces) to avoid unnecessary contact with the ill persons.
 - If you identify any client with severe <u>symptoms</u>, notify your public health department and arrange for the client to receive immediate medical care. If this is a client with suspected COVID-19, notify the transfer team and medical facility before transfer
 - Ensure that all common areas within the facility follow good practices for environmental cleaning.
 Cleaning should be conducted in accordance with <u>CDC recommendations</u>.



WHAT SHOULD WE DO WHEN A COVID-19 OUTBREAK ENDS IN OUR COMMUNITY?

When public health officials determine that the outbreak has ended in your local community, take time to talk over your experiences with your clients and staff.

- Evaluate the effectiveness of your emergency operations and communication plans
 - Discuss and note lessons learned.
 - Maintain and expand your planning team.
 - o Participate in community-wide emergency preparedness activities.

ADDITIONAL INFORMATION

The ISDH call center for healthcare providers and members of the public who have concerns about COVID-19 is now staffed from 8 a.m. to 8 p.m. at 317-233-7125. After-hours calls should be directed to 317-233-1325 and will be answered by an on-call epidemiologist.

Additional information and resources for COVID-19 are available at the links below.

- CDC COVID-19 guidance for homeless shelters https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html
- CDC COVID-19 recommendations for environmental cleaning and disinfection:
 https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html
- CDC steps to help prevent the spread of COVID-19 if you are sick: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
- ISDH guidance for home care: https://www.in.gov/isdh/files/IN COVID-19 Home Care 2.28.20.pdf
- ISDH COVID-19 webpage: https://on.in.gov/COVID19

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